

Keefektifan Trapezius Squeezing Test sebagai indikator kedalaman anestesia saat pemasangan sungkup laring dihubungkan dengan Bispectral Index = Trapezius Squeezing Test effectiveness as an indicator of anesthesia depth at laryngeal mask insertion associated to Bispectral Index / Rudy Nugroho

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Abstrak

ABSTRAK

Latar belakang : Pemasangan sungkup laring tanpa menggunakan obat pelumpuh otot membutuhkan tingkat kedalaman anestesia yang cukup untuk mendepresi refleks jalan napas sehingga menghindari tersedak, batuk dan laryngospasm. Tes klinis yang mudah, akurat dan aplikatif diperlukan untuk menghindari terjadinya komplikasi seperti di atas. Tujuan penelitian ini adalah mengetahui keefektifan trapezius squeezing test sebagai indikator kedalaman anestesia saat pemasangan sungkup laring dihubungkan dengan Bispectral Index.

Metode : Setelah lolos kaji etik dan mendapatkan persetujuan klinik, 105 pasien ASA 1-2 dilakukan pemasangan sungkup laring dengan trapezius squeezing test sebagai prediktor kedalaman anestesia. Semua pasien mendapatkan premedikasi midazolam 0,05mg/kgBB dan fentanyl 1 mcg/kgBB. Induksi dilakukan dengan propofol titrasi, dengan kedalaman anestesia diukur dengan trapezius squeezing test. Pemasangan sungkup laring dilakukan bila trapezius squeezing test negatif. Dicatat keberhasilan pemasangan sungkup laring. Tekanan darah, laju nadi dan nilai Bispectral Index juga didokumentasikan.

Hasil : Sungkup laring berhasil dipasang pada 88 pasien sedangkan 14 pasien gagal dilakukan pemasangan sungkup laring walaupun trapezius squeezing test negatif. Nilai median Bispectral Index saat trapezius squeezing test negatif adalah 35.

Kesimpulan : Trapezius squeezing test merupakan indikator klinis yang dapat diandalkan untuk menilai kedalaman anestesia saat pemasangan sungkup laring.

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ABSTRACT

Background : Laryngeal mask insertion without using muscle relaxant requires a level of depth of anesthesia sufficient to depress airway reflexes to avoid choking, coughing and laryngospasm. Easy, accurate and applicable clinical tests are required to avoid complications as above. The purpose of this study was to determine the effectiveness of the trapezius squeezing test as an indicator of the depth of anesthesia when inserting laryngeal mask airway associated with Bispectral Index.

Methods : After ethical clearance and receive informed consent, 105 ASA 1-2 patients were done laryngeal mask insertion with trapezius squeezing test as a predictor of anesthesia depth. All the patient were receive premedication midazolam 0,05 mg/kg and fentanyl 1 mcg/kg. Induction were done by propofol titration with anesthesia depth is measured by trapezius squeezing test. Laryngeal mask were inserted when trapezius squeezing test negative. The successful of laryngeal mask insertion was recorded. Blood pressure, pulse rate and Bispectral Index score were also documented.

Result :Laryngeal mask successfully inserted in 88 patients while 14 patients failed despite the negative

results of trapezius squeezing test. The median score of Bispectral Index when trapezius squeezing test negatif was 35.

Conclusion : Trapezius squeezing test is a reliable clinical indicator to assess the depth of anesthesia during laryngeal mask insertion.